



ARIZONA STATE BOARD OF NURSING
INACTIVE STATUS APPLICATION

Registered Nurse, Licensed Practical Nurse, Advance Practice Nurse
and School Nurse

- There is no fee required for inactive status.
• Inactive status is for individuals who will not be practicing nursing with their Arizona license/certificate.
• The inactive status can be requested by any nurse who holds an Arizona license in good standing.
• If an inactive nurse desires to resume nursing practice in Arizona, they must submit a renewal application.

FOR OFFICE USE ONLY

* DESIGNATES A REQUIRED FIELD - PRINT CLEARLY IN ALL CAPITAL LETTERS

*1. WRITE the Number(s) of License/Certificate You Want To Inactivate

Grid for entering license numbers for RN, AP, LP, CRNA, and SN.

Large empty box for office use only.

*2. DEMOGRAPHICS

*Legal First Name

*Middle Name

*Legal Last Name

*All Former Last Names

*SSN

*Date of Birth

Grids for entering demographic information: name, SSN, date of birth.

*3. MAILING ADDRESS

*Street Address Line 1

Street Address Line 2

*City

*State/Province

*Zip Code

*County (Ex: Maricopa)

Country (Ex: USA)

Grids for entering mailing address information.

*4. CONTACT INFORMATION (Either a home or cell phone number is required)

*Home Phone Number

*Cell Phone Number

*E-mail Address

Grids for entering contact information: phone numbers and email address.

I hereby certify that I am the person who is referred to in the forgoing application for inactive nurse status in the state of Arizona; that the information herein is true and correct; that I understand I CANNOT practice nursing on my Arizona license while on inactive status; and that I have read and understand this application.

SIGNATURE - REQUIRED

Date

Mail Application to:
4747 North 7th Street, Suite 200
Phoenix, AZ 85004-3655

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